

**HONOLULU ETHICS COMMISSION**

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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HONOLULU  
ETHICS COMMISSION  
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**2019 ANNUAL REPORT**Lobbyist Annual Report  
(January 1 – December 31, 2019)  
(Type or Print Clearly)

<b>PART I LOBBYIST</b>		
NAME (Last) (First) (Middle) Lopez, Keali'i		
LOBBYIST FIRM/EMPLOYER (if applicable) AARP Hawaii		TELEPHONE (808) 545-6001
MAILING ADDRESS (No. and Street or P.O. Box) 1132 Bishop Street, Suite 1920		FAX
		EMAIL klopez@aarp.org
(City) Honolulu	(State) Hawaii	(Zip Code) 96813

<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) AARP Hawaii		TELEPHONE (808) 545-6001
MAILING ADDRESS (No. and Street or P.O. Box) 1132 Bishop Street, Suite 1920		FAX
		EMAIL klopez@aarp.org
(City) Honolulu	(State) Hawaii	(Zip Code) 96813

<b>PART III EXPENDITURES, BY TYPE</b>			
Political Contributions	Amount N/A	Receptions, Meals, Food & Beverages	Amount N/A
Preparation & Distribution of Lobbying Materials	Amount N/A	Media Advertising	Amount N/A
Entertainment & Events	Amount N/A	Other <input type="checkbox"/> Additional Sheet(s) Attached	
TOTAL N/A			

## PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING

Fees	Amount 0.00
Compensation	Amount 0.00
Contributions	Amount 0.00
Membership Fees	Amount 0.00
<input type="checkbox"/> Check here if additional sheets attached	<input checked="" type="checkbox"/> n/a



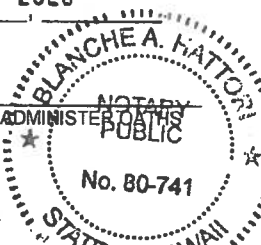
## PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED

<input checked="" type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input checked="" type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below):		

## PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME (e.g., Bill X (2019), passed)

1.	Outcome:	4.	Outcome:
2.	Outcome:	5.	Outcome:
3.	Outcome:	<input type="checkbox"/> Additional Sheet(s) Attached	

## PART VII LOBBYIST CERTIFICATION

<p>I hereby certify that the foregoing statements are true and correct.</p>  <p>LOBBYIST SIGNATURE</p> <p>Jan. 29, 2020</p> <p>DATE</p>	<p>Subscribed and sworn to before me</p> <p>This ____ day of JAN 29 2020</p> <p>By: </p> <p>NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER THIS PUBLIC</p> <p>BLANCHE A. HATTORI</p> <p>My commission expires:</p> <p>OCT 14 2020</p> 
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